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PTO/SB/01 (01-05)

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/047.913	
	Filing Date	January 15, 2002	
	First Named Inventor	Joseph Mulvey	
	Title	ALPHANUMERIC INFORMATION INPUT METHOD	
	Art Unit	2170	
	Examiner Name	Xiomara L. Bautista	
Attorney Docket Number		022385-004100US	

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number: 46670

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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City		State	Zip
Country			
Telephone		Email	

I am the:

☐ Applicant/inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	Date 5/22/2006
Name Gregory John Whelan	Telephone (860) 480-2777
Title and Company Senior Vice President and General Counsel	

NOTE: Signatures of all the inventor or assignee of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

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